

Application Data Sheet**Application Information**

Application Number::

Filing Date::

Application Type::

Subject Matter:: **Utility**

Suggested Classification::

Suggested Group Art Unit::

Title:: **METHOD FOR INTERCONNECTING ACTIVE
AND PASSIVE COMPONENTS, AND A
RESULTING THIN HETEROGENEOUS
COMPONENT**Attorney Docket Number:: **4590-474**

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

Total Drawing Sheets:: **6****Applicant Information**Applicant Authority Type:: **Inventor**Primary Citizenship Country:: **France**Status:: **Full Capacity**Given Name:: **Christian**

Middle Name::

Family Name:: **VAL**

Name Suffix::

City of Residence:: **St Remy Les Chevreuse**

State or Province of Residence::

Country of Residence:: **France**Street of Mailing Address:: **81 rue de Paris**City of Mailing Address:: **St Remy Les Chevreuse**Postal or Zip Code:: **78470**

Applicant Authority Type:: **Inventor**
Primary Citizenship Country:: **France**
Status:: **Full Capacity**
Given Name:: **Olivier**
Middle Name::
Family Name:: **LIGNIER**
Name Suffix::
City of Residence:: **Versailles**
State or Province of Residence::
Country of Residence:: **France**
Street of Mailing Address:: **1 boulevard des Jeux Olympiques**
City of Mailing Address:: **Versailles**
Postal or Zip Code:: **78 000**

Correspondence Information

Correspondence Customer No:: **33308**
Phone Number:: **(703) 684-1111**
Fax Number:: **(703) 518-5499**
E-Mail Address:: **docketing@ipfirm.com**

Representative Information

Representative Customer Number::

Representative Designation:: Registration Number:: Representative Name::

Primary **37,093** *Kenneth M. Berner*

Primary or Associate

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FR	03 07977	July 1, 2003	Yes
	PCT/EP2004/051314	June 30, 2004	Yes

Assignee Information

Assignee Name:: **3D PLUS**
Street of Mailing Address:: **641 rue Hélène Boucher, Z.I.**
City of Mailing Address:: **BUC**
State of Mailing Address::
Country of Mailing Address:: **FRANCE**
Postal or Zip Code:: **78532**